

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT RICK OLSON TO HOUSE OF REPRESENTATIVES

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

RICK OLSON

Political Party (if applicable)

DEMOCRAT

Office Sought

HOUSE OF REPRESENTATIVES

District (if Senate or House)

#68

SIGNATURE OF PERSON FILING REPORT

515-78-7063
TELEPHONE

10/18/08
DATE SIGNED

FORM

DR-2

(Rev. 07/2004)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

Late reports are subject to
possible civil and criminal
penalties.

I AM FILING A

10/14/08

(report date)

REPORT FOR (1) ELECTION/(2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the
committee. This amount **MUST** be the same as the cash on hand at the end
of the last reporting period or must be zero if this is first report filed.)

6,476.03

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

14,450.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

20,926.03

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

10,672.42

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must
be zero) (Attach DR-3)

10,253.61

*UNPAID BILLS (From Schedule D - Attach Schedule D)

-0-

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

-0-

*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

-0-

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

-0-

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT RICK OLSON TO HOUSE OF REPRESENTATIVES

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
7/28/08	ID# 6063 CK# 2194	IA DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE 5530 WEST PARKWAY SUITE 100 JOHNSON IA 50131		\$ 500 ⁰⁰	
7/28/08	ID# 6073 CK# 1162	IOWA MEDICAL POLITICAL ACTION COMMITTEE 1001 GRAND AV WEST DES MOINES IA 50265		250 ⁰⁰	
8/01/08	ID# 6116 CK# 1748	POLITICAL ACTION IOWA DEALERS PO BOX 65840 WEST DES MOINES IA 50265		200 ⁰⁰	
8/13/08	ID# 6089 CK# 419	OPERATING ENGINEERS LOCAL 234 POLITICAL FUND 4880 HUBBELL DES MOINES IA 50317		1000 ⁰⁰	
8/13/08	ID# 7310 CK# 3217	CENTRAL IA BUILDING & CONSTRUCTION TRADES COUNCIL POLITICAL ACTION COMMITTEE PO BOX 7310 DES MOINES IA 50309		250 ⁰⁰	
8/13/08	ID# 6429 CK# 2163	HEAVY HIGHWAY PAC 2415 INGER SOLL DES MOINES IA 50312		1000 ⁰⁰	
8/13/08	ID# 6236 CK# 1337	LABORERS LOCAL 177 POLITICAL ACTION COMMITTEE 2121 DELAWARE DES MOINES IA 50317		500 ⁰⁰	
8/24/08	ID# 6021 CK# 002304	CREDIT UNION POLITICAL ACTION COMMITTEE P.O. BOX 10409 DES MOINES IA 50306		1,000 ⁰⁰	
8/26/08	ID# 6062 CK# 380	IOWA CERTIFIED PUBLIC ACCOUNTANTS PAC 950 OFFICE PARK ROAD SUITE 300 WEST DES MOINES IA 50265		100 ⁰⁰	
8/26/08	ID# 6027 CK# 2703	DEERE PAC IOWA 666 GRAND AV SUITE 1707 DES MOINES IA 50309		250 ⁰⁰	

SUB-TOTAL

\$ 5,050⁰⁰

TOTAL (if last page of this schedule)

\$

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no initial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT RICK OLSON TO HOUSE OF REPRESENTATIVES

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FOR FUND-RAISER INCOME
8/26/08	ID# 6004 CK# 4812	ASSOCIATED GEN CONTRACTORS OF IA PAC 701 E COURT AV DES MOINES IA 50309		\$ 2,500 ⁰⁰	
8/26/08	ID# CK# 5743	WALT & JUDY TOMENGA 7250 HYPERION POINTE JOHNSTON IA 50131		100 ⁰⁰	
8/26/08	ID# 9716 CK# 2220	IBEW LOCAL 347 PAC FUND 850 18 TH ST DES MOINES IA 50314		1,000 ⁰⁰	
8/26/08	ID# 6494 CK# 1222	SAC + FOXTRIBE OF MISSISSIPPI IOWA 349 MESKAWKI ROAD TAMA IA 52399		500 ⁰⁰	
9/08/08	ID# 6060 CK# 2539	IOWA COMMITTEE ON POLITICAL EDUCATION 2000 WALKER SUITE A DES MOINES IA 50317		200 ⁰⁰	
9/08/08	ID# 6148 CK# 622	IRON WORKERS LOCAL #67 POLITICAL ACTION COMMITTEE 1501 E AURORA AV DES MOINES, IA 50313		500 ⁰⁰	
9/26/08	ID# 6070 CK# 3701	IOWA LAW PAC 521 E LOCUST 3 RD FLR DES MOINES IA 50309		1000 ⁰⁰	
9/26/08	ID# 6133 CK# 1922	SOUTH CENTRAL IOWA FEDERATION OF LABOR AFL-CIO CITIZENSHIP FUND 300 E LOCUST STE 260 DES MOINES, IA 50309		250 ⁰⁰	
9/26/08	ID# 6237 CK# 2077	ABATE PAC 3118 EASTERN AV. NE CEDAR RAPIDS IA 52412		200 ⁰⁰	
10/02/08	ID# 6098 CK# 3588	IOWA BEVERAGE PAC 321 E WALNUT SUITE 310 DES MOINES IA 50309		500 ⁰⁰	

SUB-TOTAL

\$6,750⁰⁰

TOTAL (if last page of this schedule)

\$

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ROCKWELL TO HOUSE OF REPRESENTATIVES

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FOR FUND- RAISER INCOME
01/03/08	ID# 6101 CK# 3507	TRUCK PAC IOWA PO BOX 6121 DES MOINES STATION DES MOINES IA 50300		\$ 800.00	
01/03/08	ID# 6323 CK# 3202	MASTER BUILDERS OF IOWA PAC 221 PARK ST. DES MOINES IA 50306		500.00	
01/14/08	ID# 6082 CK# 1397	MIDAMERICAN ENERGY CO EFFECTIVE GOVERNMENT COMMITTEE 666 GRAND AV DES MOINES IA 50303		200.00	
10/14/08	ID# 6027 CK# 2763	DEERE PAC IOWA 666 GRAND AV #1707 DES MOINES IA 50309		250.00	
01/14/08	ID# 6064 CK# 2278	IOWA FRIENDS OF RURAL ELECTRIFICATION 8525 DOUGLAS AV #48 DES MOINES IA 50322		200.00	
01/14/08	ID# 6139 CK# 2334	UNITED STEEL WORKERS OF AMERICA LOCAL #310 125 NW BROADWAY DES MOINES IA 50313		100.00	
01/14/08	ID# 6019 CK# 0652	CWA LOCAL 7102 POLITICAL ACTION 3612 SW 9TH ST DES MOINES IA 50315		100.00	
01/14/08	ID# 6148 CK# 632	IRON WORKERS LOCAL #67 POLITICAL ACTION COMMITTEE 1501 E AURORA AV DES MOINES IA 50313		500.00	
	ID# CK#				
	ID# CK#				

SUB-TOTAL

\$ 2,650.00

TOTAL (if last page of this schedule)

\$ 14,450.00

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT RICK KOLSON TO HOUSE OF REPRESENTATIVES

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08/25/08	ID# CK# 1261	HOUSE TRUMAN FUND 1111 ARMY POST ROAD DES MOINES IA 50321		\$ 4,000 ⁰⁰
10/06/08	ID# CK# 1262	HOUSE TRUMAN FUND 1111 ARMY POST ROAD DES MOINES IA 50321		4,000 ⁰⁰
10/13/08	ID# CK# 1263	US POST MASTER 4815 MAPLE DR PLEASANT HILL IA 50327	POSTAGE FOR MAILING	1,693 ⁹⁸
10/13/08	ID# CK# 1264	CARTER PRINTING 1739 EAST GRAND DES MOINES IA 50316		973 ⁴⁴
08/29/08	ID# CK# NA	BANK OF AMERICA P.O. BOX 25118 TAMPA, FL 33622-SIT	CHECK ENCLOSURE FEE	5 ⁰⁰
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 10,672 ⁴²

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)